Intervention Support Approach

1

Monitoring

Through an ongoing monitoring and continuous improvement cycle with triangulation of:

- National dashboards and data, principally use of the General Practice Dashboard and annual Electronic Practice Declaration (e-dec)
- Locally available dashboards/data sets and local intelligence *
- Targeted, structured conversations with practices using the Practice Support Level Framework (or other tool/s)
- Take a risk-based approach to identify practices requiring intervention support, ensuring systematic support for all practices as part of the rolling programme of contract reviews

2)

Diagnosis

STABILISE

- Practice has issues with maximising income, and/or workforce capacity, and/or other issues preventing them from engaging in improvement
- may be a low-income practice or one which is facing additional challenges – constrained estate, local workforce shortage or unusually high-needs population
- · Initial focus may be one of these issues rather than all.

IMPROVE

- · Operational model is suboptimal
- Practice willing, may be maximising income, and has capacity (including sufficient headspace) and commitment to make improvements to operational model
- Practice has a culture to engage staff in change and clinical and managerial support and alignment to make the changes

SUSTAIN

- Operational model is effective (e.g. practice is implementing MGP)
- Practice is maximising income and has sufficient headspace to undertake improvement
- Practice innovating and engaged in continuous improvement
- Practice has a culture to engage staff in change and clinical and managerial support and alignment to make changes

3

Intervention / action

MANAGE

- Assessment of service provision/contract compliance and likelihood of successful enforcement action to secure improvement, including an improvement plan with close monitoring by the ICB
- Assessment of provider's alignment to local strategic plans for primary care and whether contractor reconfiguration (e.g. managed mergers or partnership changes) or as a last resort, a managed exit should/could be facilitated

STABILISE

 Resilience support where appropriate e.g. where crisis brought on by sudden staffing challenges

IMPROVE

- Local ICB offer to practices/PCNs delivered directly, through training hub or another local partner.
- Supporting practices to implement MGP with other system priorities e.g. integrated neighbourhood working, pop. health management.
- · Local ICB offer to build capability in delivering change
- Local ICB offers on specific areas e.g. making the most of Cloud Based Telephony or to improve practice websites

SUSTAIN

- Encourage practice to share their approach; case studies developed and shared
- Encourage and support peer ambassadors from the practice; local community of practice to support ongoing development of neighbouring practices
- · Include in research into good practice

- Evaluation to assess impact
- Ongoing monitoring as at

* Local intelligence includes feedback from Health and Wellbeing Board, local data (e.g. patient feedback and data from patient engagement activities, including from 1 October from Patient Charter 'You and Your GP'), feedback from LMCs, training hubs, Health Watch known local challenges e.g. new care home or housing estate